L18000113415

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(Address)						
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1022 FEB 28 AM IO: 2 SEC LE FARY OF STA TAIT AHASSEE, FL

ALLAHASSEE, FLORE

RECEIVED

RAIROICH8

MAR 0 1 2072 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 513985 8368973

AUTHORIZATION

COST LIMIT : \$ /3/5.00

ORDER DATE: February 24, 2022

ORDER TIME : 9:51 AM

ORDER NO. : 513985-008

CUSTOMER NO: 8368973

CHANGE OF AGENT

NAME: FIRST COAST POWER HOLDINGS,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

, STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ame of the limited liability company: FIRST COAST							
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	((b)			any:		
	501 RIVERSIDE AVENUE SUITE 600		РО ВОХ				_	
	JACKSONVILLE. FL 32202		SAINT AL	UGUSTINE, FL 320	85			
	07/18/2018		L1800017	'3615				
3.	Date of filing/registration in Florida	4.		Document number				
5. (a)								
	Registered Agent and Registered Office shown on the records of INCORP SERVICES, INC	the Floric	a Dept. of Stat	te:				
	Registered Office Address MUST BE FLORIDA STREET	ADDRES	<u> </u>	_				
	17888 97TH COURT NORTH			_	SE SE			
	LOXAHATCHEE	34470 L		_	LL AI	FEB 2	7	
					AHAS	æ		
(b)	Enter name of NEW Registered Agent and/or NEW Registered				OF'S	AM 10: 25		
						<u>?</u>		
	Corporation Service Company			_	۲۲;	S		
	NEW Registered Office Address:							
	1201 Hays Street			_				
	Tallahassee, FI	32301		_				
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register iability co of the lir	ed office an ompany, it is nited liability	d the business office s hereby confirmed y company or as off	e of the that the	registe chang	red e(s)	
_/s/S	/s/Stephanie Clarkson			Stephanie Clarkson, Manager				
Signa	ature of a member or authorized representative of a member			Printed or typed name	of signee			
provis the ob- to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change.	v perform	ance of my e	duties, and I am fam	ıiliar wi	th and	accept	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent Grace E. Kirby, Asst. Vice President